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CONFIRMATION NO. 4504

|   |   |                               |   |  |                                |
|---|---|-------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/643,516  | <b>FILING OR 371(c) DATE</b><br>08/19/2003<br><b>RULE</b>   | <b>CLASS</b><br>709           | <b>GROUP ART UNIT</b><br>2151   | <b>ATTORNEY DOCKET NO.</b><br>57442/03-533 |                                |
| <b>APPLICANTS</b><br>J. David Payne, Broken Arrow, OK; <b>N.T.</b>  |   |                               |   |  |                                |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/404,491 08/19/2002 <b>N.T.</b>   |   |                               |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br><b>None</b>   |   |                               |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br><b>** 11/13/2003</b>  |   |                               |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <b>N.T.</b><br>Examiner's Signature <b>N.T.</b> Initials |   | <b>STATE OR COUNTRY</b><br>OK | <b>SHEETS DRAWING</b><br>6  | <b>TOTAL CLAIMS</b><br>11                  | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>22206   |   |                               |   |  |                                |
| <b>TITLE</b><br>System and method for data management   |   |                               |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>375   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |